

Clark County Coroner
1704 Pinto Lane
Las Vegas, NV 89106
(702) 455-3210



AUTOPSY REPORT

Case Number: [REDACTED]

October 3, 2017

AUTOPSY REPORT

PATHOLOGIC EXAMINATION ON THE BODY OF

[REDACTED]


DIAGNOSES

1. Gunshot Wound of the Right Upper Chest, Penetrating (see injury description).
2. Hemopneumothorax, Left, Chest.
3. Mediastinal Hemorrhage, Chest.
4. Pale Internal Organs consistent with Acute Blood Loss.
5. Dilated Cardiomyopathy, Heart.
6. Cardiomegaly (555 grams), Heart.
7. Coronary Atherosclerosis, Moderate, Heart.
8. Pulmonary Edema, Bilateral, Lungs.

OPINION

CAUSE OF DEATH: The cause of death of this [REDACTED]-year-old [REDACTED] male, [REDACTED], is GUNSHOT WOUND OF THE RIGHT UPPER CHEST.

MANNER OF DEATH: HOMICIDE.



Lary Simms, DO, MPH (DABP-AP, CP, PP)
Medical Examiner
Clark County, Nevada (Las Vegas)

DATE: Dec 20 2017

LS/amu

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Case Number: [REDACTED]

October 3, 2017

POSTMORTEM EXAMINATION ON THE BODY OF

[REDACTED]

NOTICE: Forensic, medical and scientific evidence as proof of a fact can establish that fact to an extent varying between slight possibility to certainty. The minimal standard of proof for all conclusions in this report is to a reasonable degree of scientific, medical and forensic certainty; the degree of certainty for any given conclusion in this report can range from this lowest standard of certainty up to beyond a reasonable doubt.

The manner of death is based on the information available at the time of signature.

AUTOPSY: Date of pronounced death is October 2, 2017. The autopsy is performed by Lary Simms, DO, MPH, Medical Examiner, at 1600 hours on October 3, 2017.

CLOTHING: The body is received unclothed; a paper identification bracelet is present on the right wrist; two blue rubber bracelets are present on the left wrist; accompanying the body is a brown top, brown belt, brown pants and green underwear.

EXTERNAL EXAMINATION: The body is that of a normally developed [REDACTED] adult. Rigor mortis is present to an equal extent in all joints. Lividity is present posteriorly. The head hair is dark. Facial stubble is present. The unshaved scalp is unremarkable. The eyes are closed. The corneas are cloudy. The irides are light. The nose, lips and mouth are unremarkable. The teeth are natural and in fair repair. No injuries are identified to the external neck. The chest and abdomen show no evidence of natural disease. The extremities are equally and symmetrically developed. The arms and hands show no evidence of acute injury and fingerprint ink is present on the hands bilaterally. The fingernails and toenails are medium in length. The external genitalia are male. The back and buttocks show no evidence of natural disease.



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INVENTORY OF RADIOGRAPHIC FINDINGS:

COMMENT: Digital radiographs are interpreted on an ENTUITIVE monitor; extracorporeal objects are present; degenerative skeletal change is present.

1. Postmortem regional radiographs of the head and neck are unremarkable.
2. Postmortem regional radiograph of the chest demonstrates opacification in the left lung field; ballistically significant and insignificant bullet fragments are scattered over the chest; a left-to-right mediastinal shift is present.
3. Postmortem regional radiographs of the abdomen and pelvis are unremarkable.
4. Postmortem regional radiographs of the extremities are unremarkable.

INVENTORY OF GUNSHOT INJURY:

1. Located in the right upper chest, 12.1 inches from the top of the head and 4.4 inches to the right of the anterior midline is a gunshot wound of entrance measuring 0.55 x 0.20 inch in dimension; the wound is composed of an eccentric 0.15 inch hole associated with a lateral abrasion tail measuring up to 0.40 inches in dimension and several satellite superficial cutaneous injuries located medially (see photographs).

The bullet courses through the skin and subcutaneous tissues of the right upper chest and enters the mediastinum through the manubrium as it crosses the midline; the bullet courses through the left carotid artery at the origin of the aorta and courses through the upper lobe of the left lung; a deformed small-caliber lead bullet and jacket

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fragments are recovered from the mediastinum and left pleural cavity.

The subcutaneous tissue of the right upper chest demonstrates a broad area of hemorrhage that extends into the anterior neck; the mediastinum demonstrates diffuse hemorrhage; the left pleural cavity contains 1800 mL of liquid blood and 100 grams of clot.

A partial exit wound is located in the left lateral parietal pleura at the 3rd intercostal space associated with ecchymosis.

The bullet courses from front-to-back, right-to-left and downward. Examination of the wound of entrance shows no evidence of close-range firing.

INVENTORY OF ADDITIONAL FINDINGS:

1. The arms bilaterally demonstrate scattered irregular and curvilinear hyperpigmented and hypopigmented areas.
2. The legs bilaterally demonstrate scattered irregular and curvilinear hyperpigmented and hypopigmented areas.
3. The dorsal surface of the left hand demonstrates several irregular and curvilinear abrasions.

INTERNAL EXAMINATION:

MEASUREMENTS AND WEIGHTS (approximate/estimate only):

Height: 74 inches
Weight: 255 pounds
Heart: 555 grams
Lungs: 900 grams

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CARDIOVASCULAR SYSTEM: Except for the findings previously described, the aorta and great vessels are unremarkable. The coronary arteries have a normal surface course and configuration; the coronary circulation is right dominant. On serial sectioning the left coronary artery system and the right coronary artery system exhibit patchy calcific concentric eccentric atherosclerosis with focal areas of narrowing up to 40%.

The valves of the heart are unremarkable; the ventricular chambers are dilated; left ventricular wall thickness ranges from 1.5 to 1.7 cm. On serial sectioning the myocardium displays no focal pathologic changes.

RESPIRATORY SYSTEM: The trachea and major bronchi are unremarkable. The pulmonary vessels are unobstructed. On serial sectioning, in addition to the findings previously described, the pulmonary parenchyma demonstrates generalized edema.

HEPATOBIILIARY SYSTEM: The capsular surface of the liver is smooth and without adhesions. On serial sectioning the hepatic parenchyma has a tan-yellow color and a firm consistency. The gallbladder and biliary tract are unremarkable.

HEMOLYMPHATIC SYSTEM: The capsular surface of the spleen is smooth and without adhesions. On serial sectioning the splenic parenchyma is pale and otherwise unremarkable. The internal lymph nodes identified are unremarkable.

GASTROINTESTINAL SYSTEM: The esophagus is unremarkable. Stomach content is 200 milliliters of red-brown fluid admixed with particulate matter. The stomach, small bowel and colon are unremarkable. The pancreas has a normal size and on serial sectioning is pale.

GENITOURINARY SYSTEM: The renal surfaces are granular. On serial sectioning the renal cortex is pale and has a normal thickness. The calyces, pelves and ureters are unremarkable.

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Liver: 2350 grams
Spleen: 330 grams
Kidneys: 300 grams
Brain: 1420 grams

BODY CAVITIES: The body is entered by a Y-shaped incision. Except for the findings previously described, the peritoneal surfaces of the body cavities are unremarkable. The internal organs that are present retain their normal anatomic position and relationships.

NECK ORGANS: The tongue shows no external injury and on serial sectioning is unremarkable. The surfaces of the epiglottis show no abnormalities.

The suprahyoid and infrahyoid (strap) muscles of the neck are dissected in layers and show no evidence of antemortem hemorrhage.

The hyoid bone is dissected. The synchondroses of the hyoid bone are fused and intact; the left greater arm is damaged at autopsy; the hyoid is otherwise unremarkable. The greater horns of the hyoid bone show no evidence of fracture or periosteal hemorrhage.

The thyroid cartilage is dissected. The superior horns and laminae show no evidence of fracture or perichondral hemorrhage.

The cricoid cartilage ring is dissected. The cricothyroid membrane shows no evidence of hemorrhage. The cricoid cartilage shows no evidence of fracture or perichondral hemorrhage.

Except for the findings previously described, the prevertebral soft tissue and muscles of the cervical vertebral column are unremarkable. The anterior cervical vertebral column shows no evidence of injury.

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ENDOCRINE SYSTEM: The thyroid gland has a normal size and on serial sectioning is pale. The adrenal glands have a normal size and on serial sectioning are pale. The rest of the endocrine system shows no identifiable abnormalities.

CENTRAL NERVOUS SYSTEM: The scalp, subscalp soft tissue and calvaria show no evidence of injury. On entering the cranial cavity the membranous compartments are free of hemorrhage. The leptomeninges and the surfaces of the cerebral hemispheres are unremarkable. The vessels at the base of the brain have a normal configuration. The base of the skull shows no evidence of injury. On serial sectioning the brain is pale and reveals no grossly visible changes of natural disease.

PHYSICAL EVIDENCE RECOVERY AND DISPOSITION:

1. Small-caliber deformed lead bullet and jacket fragments recovered from the mediastinum and left pleural cavity to custody of the Las Vegas Metropolitan Police Department.

FLUIDS AND TISSUES SUBMITTED:

1. Postmortem chest blood.
2. Postmortem peripheral blood (iliac vein).
3. Vitreous humor.
4. Liver tissue.
5. Bile.
6. Brain tissue.
7. Urine.
8. Autopsy tissue to stock.

TESTING ORDERED:

1. Toxicologic analysis [NMS: Basic] on autopsy blood.